

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Torsten Brandenburger and Ismael Rahimy

Application No.: 10/575,690

Group: 3761

371(c) Date: August 23, 2006

Examiner: Leslie R. Deak

Confirmation No.: 3600

For: Connector for Medical Liquid-Containing Packages and Medical Liquid-Containing Packages

<b>CERTIFICATE OF MAILING OR TRANSMISSION</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
Date	Signature
_____ Typed or printed name of person signing certificate	

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

**The claims fee has been calculated as shown below:**

					SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	17	MINUS	* 20	0	X \$ 26	\$		X \$52	\$
INDEP	2	MINUS	** 3	0	X \$110	\$		X \$220	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$195	\$		+ \$390	\$
					TOTAL = \$ 0			TOTAL = \$ 0	

\* not fewer than 20

\*\* not fewer than 3

**The Application Size Fee has been calculated as shown below:***(Effective for cases filed on or after December 8, 2004)*

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to
			Rate	Total Amount Owed	Rate	Total Amount Owed	
18	100	0	X \$135	\$[ ]	X \$270	\$[ ]	100 Sheets

**Petition for Extension of Time**

- ☒ Applicant hereby petitions to extend the time to respond to the Office Action dated April 9, 2010 for one month(s) from July 9, 2010 to August 9, 2010. The appropriate fee is set forth below.
- ☐ *[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]*

**Please charge Deposit Account No. 08-0380 for the following fees:**

<input checked="" type="checkbox"/>	Petition for one month Extension of Time	\$ 130
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
	TOTAL:	\$ 130

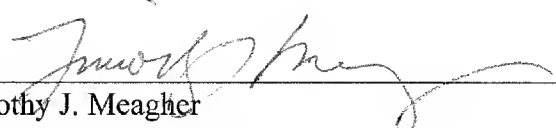
**A check is enclosed in payment of the following fees:**

<input type="checkbox"/>	Petition for [    ] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
	TOTAL:	\$ _____

☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

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Dated: 8/9/10